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maintenance fee notification	s.	in Block I, by (a	JE FEE and PUBLIC ders and notification ) specifying a new of	orrespondence address	nired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sepa	arate FEE ADDRESS for
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47396 75	90 10/14/2005	have its own certificat	al paper, such as an assignment te of mailing or transmission.	ent or formal drawing, must		
HITT GAINES, F AGERE SYSTEMS PO BOX 832570 RICHARDSON, T /18/2006 LWONDIM2 00000	S INC. X 75083	JAN 1 7		I hereby certify that the States Postal Service addressed to the Matransmitted to the USI	rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for find the sufficient Postage for find Stop ISSUE FEE address PTO (571) 273-2885, on the standard Schumacher	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
50 AFOA			ER	Hala	about Saku	macles (Signature)
FC:1501 FC:1504	504 300.00 DP			Gang	iny 10, 2006	(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/940,512	09/940,512 08/29/2001		Stuart T. Stanton		STANTON 6	5220
TITLE OF INVENTION: PF	SMALL ENTITY	BEAM LITHOGRA	·	AND METHOD EMP	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional NO		)	\$300	\$1700	01/17/2006
. EXAM	. EXAMINER		ART UNIT CLASS-SUBCLA		]	
<ul> <li>DAY, HERNG DER</li> </ul>		2128		703-003000	-	
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNI	B) RESIDENCE: (CIT	RESIDENCE: (CITY and STATE OR COUNTRY)				
Agere Systems Inc.			Allentown, PA 18109			
Elith LLC  New Providence, NJ 07974  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
4a. The following fee(s) are			. Payment of Fee(s):			
Issue Fee			A check in the amount of the fee(s) is enclosed.			
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5. Change in Entity Status  a. Applicant claims St	(from status indicated above MALL ENTITY status. See		☐ b. Applicant is n	o longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).
The Director of the USPTO NOTE: The Issue Fee and Puinterest as shown by the reco	s requested to apply the Issu oblication Fee (if required) dis of the United States Pate	ue Fee and Publicate vill not be accepted and Trademark	tion Fee (if any) or to I from anyone other t Office.	re-apply any previous han the applicant; a reg	ly paid issue fee to the application is the state of the application of the state o	ation identified above. he assignee or other party in
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Typed or printed name Charles W. Gaines				Registration		
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